PTO/SB/22 (01-09)
Approved for use through 02/28/2009. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		02	-321
Application Number 10/632,061		Filed J	uly 31, 2003
For CONTROLLED DELIVERY OF THERAPEUTIC AGENT			
Art Unit 1612		Examiner C	hris E. Simmons
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$130	<u>Small Entity Fee</u> \$65	\$ 130.00
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  X The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number			
I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number  X attorney or agent under 37 CFR 1.34.			
Registration number if acting u		29,674	·
/Rosemary M. Miano/		September 21, 2009	
Signature		Date	
Rosemary M. Miano		908.518.7700	
Typed or printed name  Telephone Number  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  X  Total of  1 forms are submitted.			
Total of forms are sub-	mary.		